	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 68 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
	Any information copied from such Reports and Statements may not be sold or used by any person for for commercial purposes, other than using the name and address of any political committee to so			
	NAME OF COMMITTEE (In Full) Citizens for Tom Petri			
Α.	Full Name (Last, First, Middle Initial) Jim Janes Mailing Address 5866 S Harbour			Date of Receipt 0 4 1 4 2 0 0 9
	City Butte Des Morts	PO Box 175 State Zip Code e Des Morts WI 54927		
	FEC ID number of contributing federal political committee.	Occupation Owner Election Cycle-to-Date 250.00		250.00
	Name of Employer Oshkosh Marine Receipt For: 2010 X Primary General Other (specify) ▼			Receipt
В.	Full Name (Last, First, Middle Initial) Dr. Sujatha Kailas Mailing Address 364 Ledgewood Dr			Date of Receipt
	City State Zip Code			0 4 2 8 2 0 0 9 Transaction ID: 90705.C40412
	Fond Du Lac	WI	54935-8938	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer self	Occupation Businessman Election Cycle-to-Date 200.00		Receipt
	Receipt For: 2010 X Primary General Other (specify) ▼			
C.	Full Name (Last, First, Middle Initial) Denise Kaminsky Mailing Address W3952 Artesian Rd			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 90705.C40413
	Fond du Lac FEC ID number of contributing federal political committee.	C	54937	Amount of Each Receipt this Period 200.00 Receipt
	Name of Employer Agnesian Healthcare	Occupation Pharmac		
	Receipt For: 2010 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 200.00	
	SUBTOTAL of Receipts This Page (optional) .)	650.00
	TOTAL This Period (last page this line numbe	er only)		